

# CITY OF ANGELS BOUNDARY LINE ADJUSTMENT APPLICATION

By \_\_\_\_\_ Date \_\_\_\_\_

Address \_\_\_\_\_

Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_

Subdivision \_\_\_\_\_ Assessor's Parcel # \_\_\_\_\_

Townsite \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Existing Zoning \_\_\_\_\_ Existing Survey \_\_\_\_\_

**Include three (3) 8 1/2 X 11 drawings of proposed adjustment showing North arrow, scale, existing boundaries, proposed boundaries, location of all structures above and below ground, easements, acreage or other significant topographic features.**

**Reason for Application:** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Will this adjustment affect any of the following? If so, how?**

	<u>Yes</u>	<u>No</u>	<u>Don't Know</u>
<b>1. Easements:</b>			
Public Utilities - Gas	( )	( )	( )
- Sewer	( )	( )	( )
- Water	( )	( )	( )
- Electrical	( )	( )	( )
Drainage	( )	( )	( )
Building Setback	( )	( )	( )
Lot Lines	( )	( )	( )
<b>2. Fences</b>	( )	( )	( )
<b>3. Any Access</b>	( )	( )	( )
<b>4. Existing Zoning</b>	( )	( )	( )
<b>5. City General Plan</b>	( )	( )	( )

*If answers are "Yes" or "Don't Know", explain on back of sheet.*

**Signature of Owner** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Signature of Affected Adjacent Owner** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Note: If the adjustment is allowed, a Record of Survey must be filed within 12 months. Deed(s) which by description do not create additional parcel(s), must accompany the Record of Survey.**

**For Office Use Only**

Received \_\_\_\_\_ By \_\_\_\_\_  
Fee Paid \_\_\_\_\_ Check No. \_\_\_\_\_

BLA Application 07/04